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46155 75	90 06/13/2006						
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APPLICATION NO.	TION NO. FILING DATE FIRST NAMED INV		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/790,928	03/02/2004 Ulrich Eggert			ggert	P400347	3248	
TITLE OF INVENTION: SHORT CHANGE GEAR							
-					I BOTH PROVIDE		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	09/13/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
LE, DAVID D		3681	3681 074-331000				
. Change of correspondence address or indication of "Fee Address" (3 CFR 1.363).			i Alevander R Schiee				
Change of correspondence address (or Change of Correspondence			or agents OR, alternatively,				
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3				
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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(A) NAME OF ASSIGNE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
etrag Ford Transm	issions GmbH		Henry-Ford-Str.1				
			D-50735 Koeln, Germany inted on the patent):				
lease check the appropriate	assignee category or categor	nes (will not be pri	nted on the pate	ent): 🗀 individual 🗷 Co	orporation of other private gr	oup entity Government	
a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							
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	from status indicated above IALL ENTITY status. See 3		☐ b. Applican	t is no longer claiming SMAI	LL ENTITY status. See 37 C	FR 1.27(g)(2).	
			* *	or to re-apply any previously ther than the applicant; a regi		12. 1 .	
Authorized Signature Moule			Date 22 August 2006				
Typed or printed name Alexander R. Schlee			Registration No. 55,912				
his collection of information	is required by 37 CFR 1.31	1. The information	is required to	obtain or retain a benefit by t	he public which is to file (and	d by the USPTO to process)	

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